

Application Data Sheet

Application Information

Application number::	09/485,193
Filing Date::	06/03/99
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R??::	
Number of CD disks::	
Number of copies of CDs::	
Sequence Submission::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	USE OF PROTHYMOSIN IN THE DIAGNOSIS AND TREATMENT OF ENDOMETRIOSIS
Attorney Docket Number::	018002-001010US
Request for Early Publication::	No
Request for Non-Publication::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	
Small Entity?::	Yes
Latin name::	
Variety denomination name::	
Petition included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers One::	
Secrecy Order in Parent Appl.::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Patrick
Middle Name:: A.
Family Name:: Schneider
Name Suffix::
City of Residence:: Temecula
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 33120 Vino Way
City of Mailing Address:: Temecula
State or Province of mailing address:: CA
Country of mailing address::
Postal or Zip Code of mailing address:: 92591

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Cynthia
Middle Name:: K.
Family Name:: French
Name Suffix::
City of Residence:: Irvine
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 14 Virgil Court
City of Mailing Address:: Irvine
State or Province of mailing address:: CA

Country of mailing address::

Postal or Zip Code of mailing address:: 92612

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Karen

Middle Name:: K.

Family Name:: Yamamoto

Name Suffix::

City of Residence:: San Clemente

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 48 Chapital

City of Mailing Address:: San Clemente

State or Province of mailing address:: CA

Country of mailing address::

Postal or Zip Code of mailing address:: 92672

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Designation::	Representative Number::	Representative Name::
Primary	37,505	Joe Liebeschuetz

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/US99/12336	06/03/99
PCT/US99/12336	Non-Provisional of	60/088,016	06/04/98

Foreign Priority Information

Country::	Application number::	Filing Date::
PCT	PCT/US99/12336	06/03/99

Assignee Information

Assignee Name::	Reprogen, Inc.
Street of mailing address::	650 Town Center, Suite 810
City of mailing address::	Costa Mesa
State or Province of mailing address::	CA
Country of mailing address::	US
Postal or Zip Code of mailing address::	92626